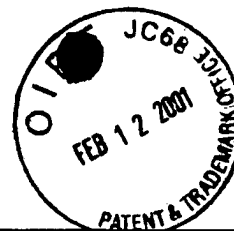




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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/680,946	10/06/2000	1634	1154	028662.96	11	34	2

Oliff & Berridge PLC
P O Box 19928
Alexandria, VA 22320

FFB - 6 2001

FILING RECEIPT



OC000000005733472

Date Mailed: 02/05/2001

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Applicant(s)

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Guy Oriol, Saint-Chamond, FRANCE;
Bernard Mandrand, Villeurbanne, FRANCE;

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Continuing Data as Claimed by Applicant

THIS APPLICATION IS A CON OF 08/412,229 03/27/1995 PAT 5,654,143
WHICH IS A CON OF 08/053,498 04/29/1993 ABN

THIS APPLICATION IS A REI OF 08/825,617, 3/31/1997
PAT. 5,817,465

Foreign Applications

FRANCE 9205322 04/29/1992

If Required, Foreign Filing License Granted 11/21/2000

Title

RNA amplification method requiring only one manipulation step

MANIPULATION

Preliminary Class

435

Data entry by : KING, DORIS

Team : OIPE

Date: 02/05/2001



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Bib Data Sheet

CONFIRMATION NO. 1475

SERIAL NUMBER 09/680,946	FILING DATE 10/06/2000 RULE	CLASS 435	GROUP ART UNIT 1656	ATTORNEY DOCKET NO. 028662.96
APPLICANTS Francois Mallet, Villeurbanne, FRANCE; Guy Oriol, Saint-Chamond, FRANCE; Bernard Mandrand, Villeurbanne, FRANCE;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** FRANCE 9205322 04/29/1992				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/21/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY FRANCE	SHEETS DRAWING 11	TOTAL CLAIMS 34
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 2		
ADDRESS Oliff & Berridge PLC P O Box 19928 Alexandria , VA 22320				
TITLE RNA amplification method requiring only one manipulation step				
FILING FEE RECEIVED 1154	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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